

Section 2105 Bail Education

Section 2105.1 Definitions

- (a) “Class” means a presentation of course material to a specific group of enrolled students.
- (b) “Classroom” means a prelicensing or continuing education place of instruction with sufficient space designed so that instructor(s) and students can communicate face-to-face in a physical facility with a high degree of privacy and relative freedom from outside interferences. Computer instruction is not considered a classroom per Section 1810.7 of the California Insurance Code (CIC).
- (c) “Commissioner” means the California Insurance Commissioner.
- (d) “Course” means education taken or given to satisfy the requirements of Insurance Code section 1810.7(a).
- (e) “Department” means the California Department of Insurance.
- (f) “Electronic Filing” means the submission of provider rosters and class presentation schedules to the Department by a provider using the Department website, electronic flat file, diskette, compact disc (CD), or digital versatile disc (DVD), or other electronic technology compatible with Department technology.
- (g) “Electronic Signature” means a CDI assigned provider log-in/-out number that allows providers to submit class presentation schedules and provider rosters online or by other electronic means. For the purpose of section 2105.7(c), “Electronic Signature” means a provider assigned student log-in/-out number that allows providers to monitor student activity.
- (h) “Fee Schedule” means the State of California, Department of Insurance, Schedule of Fees and Charges.
- (i) “Instructor” means a person who teaches a course to students on behalf of an approved provider.
- (j) “Original signature” means the provider director's actual signature. Original signatures are required on all provider and course applications and renewals. A provider may utilize either a controlled signature stamp, a computer generated signature, or appoint an authorized designee for purposes of signing any other forms. Prior to using either a signature stamp or a computer generated signature, the provider must submit to the Department a letter thoroughly explaining the steps that the provider has taken to ensure the security of either the stamp or computer generated signature. Prior to utilizing an authorized designee, the provider must submit to the Department a list of the names of the persons so authorized, along with a sample of each person's signature or computer generated signature.
- (k) “Provider” means an individual or business entity who offers prelicensing or continuing education courses to students or prospective students.

- (l) “Provider director” means the individual employed by a provider who the provider has designated as the person responsible for administering the provider’s prelicensing and continuing education business.

Authority: C.I.C. § 1812

Reference: C.I.C. §1810.7

2105.2 Prelicensing Education Curriculum

An approved prelicensing education course must be taught in a classroom and must impart information on all of the following topics. Each topic below must be cross referenced to the material submitted to the commissioner before the material can be approved:

- (a) Insurance Code sections 1724.5, 1733, 1734, 1735; Article 6 commencing with section 1666; Article 13 commencing with section 1737; 1800 – 1823;
- (b) California Code of Regulations, Title 10, Chapter 5, Subchapter 1, Article 2, sections 2053 – 2104;
- (c) Penal Code sections 1166, 1195, 1269.b, 1269g, 1270, 1270.1, 1275, 1276.5, 1285, 1286, 1296, 1298, 1299, 1301, 1302, 1304, 1306;
- (d) 18 United States Code 1033 and 1034;
- (e) Common law and ethical duties of bail agents to sureties, arrestees, indemnitors and others;
- (f) Overview of bail and the function of bail agents;
- (g) Criminal and courtroom procedures;
- (h) Special obligations to the court;
- (i) Collateralizing bail undertakings;
- (j) Fugitive location methods and resources; and,
- (k) Interaction with police and prosecutors.

Authority: C.I.C. § 1812

Reference: C.I.C. §1810.7

2105.3 Providers

- (a) Provider Approval
 - (1) An individual or business entity who wants to be approved as a provider must submit to the Department a Prelicensing/Continuing Education Program Provider Certification/Renewal Application, which appears as section 2105.12, along with the fee recited for Insurance Code section 1751.1(a) as listed in the Fee Schedule.

- (2) A provider shall not be approved if an incomplete application is submitted to the Department. The incomplete application will remain on file for one year unless withdrawn by the applicant. After one year, a new application is required. Notification that an application is complete does not mean approval has been or will be granted. The Department must decide whether to approve a provider within sixty days of receiving a completed application. If the Department initiates an investigation of an applicant for an alleged violation that would, if proven, result in the suspension, revocation, or denial of the provider's approval to provide prelicensing or continuing education to bail agents, the sixty-day period will toll until the completion of the investigation. If, after completion of the investigation, the applicant is referred to the Department's Legal Division, the Department will have 30 days from the date of the referral to issue a Statement of Issues pursuant to Government Code section 11504, or to issue the approval.
 - (3) The Department may refuse to approve a provider based on any of the grounds for which it may deny an insurance agent license under Insurance Code sections 1668 or 1668.5.
 - (4) A nonresident applicant for provider approval must file with the Department an Out-of-State Provider Jurisdiction Agreement, which appears as section 2105.13.
 - (5) The Department may investigate and require the filing of any supplementary documents, affidavits and statements it deems necessary to obtain information that will aid in determining whether the prerequisites for approval have been met.
 - (6) Provider approval will be valid for two years from the date it is granted.
- (b) Renewal of Provider Approval
- (1) To renew approval, a provider must submit to the Department a Prelicensing/Continuing Education Program Provider Certification/Renewal Application along with the fee recited for Insurance Code section 1751.1(b) listed in the Fee Schedule.
 - (2) Approval as a provider may not be renewed if the renewal application is incomplete. The Department must inform all renewal applicants in writing if the application contains deficiencies requiring correction, and the nature of those deficiencies.
 - (3) Renewal applications must be received by the Department at least sixty days before the provider's approval expires to maintain continuity of approval.
 - (4) An incomplete renewal application will remain active for one year unless withdrawn by the applicant. After one year, a provider must submit a new application. Notification that an application is complete does not mean approval or disapproval. The Department must decide whether to renew the approval within sixty days of receiving a completed application.

- (5) A provider whose approval has expired may late renew up to 60 days after the expiration date. If a renewal is more than 60 days after expiration of approval, the provider must re-file the Prelicensing/Continuing Education Program Provider Certification/Renewal Application.
- (6) A provider whose approval has expired may not present a class for credit until the Department has issued a written notice of renewal.
- (c) A provider must notify the Department in writing within ten (10) days following any change in information recorded on the Prelicensing/Continuing Education Program Provider Certification/Renewal Application.
- (d) A provider must obtain the Department's written consent before using a fictitious name in an act for which provider approval is required. A provider must notify the Department if it changes or discontinues use of a true or fictitious name. The Department may in writing disapprove the use of a fictitious or true name, other than the legal name of an individual, on any of the following grounds:
 - (1) The name interferes with or is too similar to a name already filed with the Department and in use by another approved provider;
 - (2) the use of the name might mislead the public in any respect; or
 - (3) the provider or applicant has already obtained approval for the use of a fictitious name and has not agreed to discontinue the use of that name. This subdivision does not prevent a provider or applicant who has lawfully purchased or succeeded to the business or businesses of other providers from using for each such business not more than two additional names, true or fictitious, consisting of names used by the predecessor businesses in their conduct as approved providers.

Authority: C.I.C. § 1812

Reference: C.I.C. §1810.7

2105.4 Instructor Qualifications

- (a) An approved provider must assure that each approved course is taught by an instructor who has at least three years of experience within the last five years in the subject matter of the course. The instructor must complete an Instructor Qualification, which appears as section 2105.14, which must then be signed by the provider director.
- (b) The Department may direct a provider not to use an instructor who does not meet the instructor qualifications recited in this section or does not adhere to other applicable requirements stated in these regulations.

Authority: C.I.C. § 1812

Reference: C.I.C. §1810.7

2105.5 Course Approval

- (a) To obtain approval of a course, a provider must submit to the Department a Bail Course Approval/Renewal Application, which appears as section 2105.15, along with the fee recited for Insurance Code sections 1751.1(c) and (e) listed in the Fee Schedule.
- (b) A course approval application must be received by the Department at least thirty (30) days before the date the course will be presented to students for the first time. An incomplete course approval application will remain active for one year from the date of receipt, unless withdrawn by the provider. After one year, a provider must submit an application. The Department must approve or reject a course within thirty (30) days of receiving an application.
- (c) A provider of a classroom course must notify the Department of the classroom location(s) where the provider intends to present the course, including the street address, city, state and zip code, and the dates and times of the presentation on a Class Presentation Schedule, which appears in section 2105.16. The notification must be received by the Department at least ten (10) business days before each time a class in which the course will be presented is scheduled to meet. The provider must file this information with the Department electronically, unless it has been submitted with a course approval application. The classroom must allow the instructor and students to communicate with a reasonable degree of privacy and without unreasonable distractions.
- (d) An advertisement for an approved course must include the name of the provider, the provider number, the course title approved by the Department, the course number, the license type for which the course is approved and the credit hours assigned. A course advertisement may mention that the course has been approved for credit by the Department of Insurance or the Insurance Commissioner only if it has been approved in writing by the Department.
- (e) A course advertisement may mention that the course has been submitted to the Department for approval only if a completed filing pursuant to Section 2105.5(a) was submitted to the Department at least thirty (30) days before the date the course will be presented to students for the first time and that the advertisement includes a notice, in at least the same size type as any language regarding the course having been submitted for approval, that the course is pending approval.
- (f) A minor change to a course that does not affect course content or presentation time may be reported to the Department by a letter at least thirty (30) days before the change is to be implemented. A new edition of written material distributed to students with virtually identical content as an edition submitted when the course was approved may, in the Department's discretion, be considered a minor change.

- (g) A major change is one that affects presentation time or that alters the course content, and requires approval as a new course. Use of different written materials is a major change, except as provided in subdivision (f).
- (h) Notification of a change in the location or date of a previously submitted class schedule, or of an additional date or location, must be submitted using electronic filing. The notification must be received by the Department at least ten business days before the meeting of the rescheduled or relocated class. Late submission of a class schedule change must be accompanied by a letter, signed by the provider director, explaining the lateness. The Department may accept or reject the class schedule change.
- (i) Credit hours are determined using a fifty (50) minute hour. Credit of less than one hour is not granted.
- (j) A student may not receive credit for more than eight (8) hours per day or 400 minutes per day.
- (k) A course will be approved only if all the content listed on the syllabus sufficiently relates to the legal duties and responsibilities of a bail licensee, and it will be taught in a structured manner and environment that contributes to the professional or technical competence of the student
- (l) A course will not be approved if it includes training in sales, marketing, communication, motivation, or products or programs offered by a specific surety.
- (m) A provider may not state or imply that a course, including an approved course, is endorsed by the Department.
- (n) If a scheduled class is cancelled, a provider must make a reasonable effort to notify all registrants of the cancellation, and maintain documentation of that effort.
- (o) Credit will be given to a student who successfully completes an expired course if the course would have been renewed and the student was unaware that the course was not approved.
- (p) The Department may revoke approval of a course if the course content was significantly changed without notice to the Department and the change affects the number of hours that would have been assigned to the course, or the change in content would make the course ineligible for approval.
- (q) Course approval will be valid for two years from the date it is granted.
- (r) For an Internet course, a provider must establish to the Department's satisfaction that the provider will employ adequate measures to assure that students are actively engaged in course material during the entire time the student is on-line, and such measures must actually be employed.

Authority: C.I.C. § 1812
Reference: C.I.C. §1810.7

2105.6 Course Renewal

- (a) A provider who wants to renew approval of an unchanged course or a course with only minor changes must submit to the Department a Bail Course Approval/Renewal Application, which appears as section 2105.15, along with the fee recited for Insurance Code sections 1751.1(d) and (f) listed in the Fee Schedule.
- (b) A Bail Course Approval/Renewal Application must be received by the Department at least thirty (30) days before the expiration of the course's approval to maintain continuity of approval.
- (c) A provider may not offer a continuing education course for credit if approval of the course has expired and the Department has not yet granted a renewal.
- (d) The Department may deny renewal of course approval if the course material no longer contains current information.

Authority: C.I.C. § 1812
Reference: C.I.C. §1810.7

2105.7 Maintenance of Records

- (a) A provider must maintain Instructor Qualification forms for each instructor.
- (b) A provider must maintain records of registration for students attending approved courses. A provider must maintain address information and telephone numbers for each student of a prelicensing education course.
- (c) For classroom courses, a provider must complete and maintain a daily attendance record, showing whether each student attended at the beginning and end of each class session. The attendance record must be on the Prelicensing and Continuing Education Program Course Attendance Record and Verification Form, which appears as section 2105.17, or on a form approved by the Department that contains the following minimum provisions:
 - (1) For prelicensing courses, the name, signature, and all or part of the social security number as required by the Department. For continuing education courses, the Prelicensing and Continuing Education Program Course Attendance Record and Verification Form name, original or electronic signature, and insurance license number of the student;
 - (2) provider name and approval number;

- (3) course title and approval number;
- (4) date and location of the class;
- (5) whether the record is for the beginning or end of a session.
- (d) Provider records must be maintained for five (5) years and must be made immediately available to the Department for inspection and copying upon request. All provider records must be maintained at a location within this State unless a Prelicensing and Continuing Education Provider Stipulation to Maintain Records Outside of California, which appears as section 2105.18, has been submitted to and accepted in writing by the Department.
- (e) A provider must maintain sufficient records to allow an accurate and reliable audit of all fees collected from and refunded to students for prelicensing and continuing education courses. These records must include, but are not limited to, bank statements, ledgers, journals, receipt books, invoices and checks.
- (f) A provider must maintain for at least two years a copy of each advertisement and solicitation that refers to a prelicensing or continuing education course. Upon good cause, the Department may require a particular provider to retain copies for a longer period.
- (g) For a correspondence course, a provider must maintain a declaration signed by each student under penalty of perjury, under the laws of the State of California, declaring that the student was engaged with the course material for the entirety of the prescribed time.
- (h) For an Internet course, a provider must maintain a description of the measures taken to ensure that students are actively engaged in the course material for the entirety of the prescribed time.
- (i) A provider must employ all reasonable means to maintain personal information of students in a secure and confidential manner.

Authority: C.I.C. § 1812

Reference: C.I.C. §1810.7

2105.8 Successful Completion of a Prelicensing Course

- (a) To obtain credit for a prelicensing course a student must attend one-hundred percent of the class.
- (b) A provider or instructor must withhold credit when a student did not pay satisfactory attention, or otherwise failed to act acceptably in class.

Authority: C.I.C. § 1812

Reference: C.I.C. §1810.7

2105.9 Successful Completion of a Continuing Education Course

- (a) To obtain credit for a continuing education course a student must attend one-hundred percent of the class, if the course was provided in a classroom. However, an instructor or provider director may for good cause allow a student to attend not less than eighty percent of a scheduled class and receive full credit. A provider or instructor must withhold credit when a student did not pay satisfactory attention, or otherwise failed to act acceptably in class.
- (b) A course may not be taken for credit more than once during a renewal period.
- (c) Successful completion of a continuing education course by means of the Internet or correspondence shall require the student to obtain a passing grade of at least 70 percent on a written final examination. The final examination must be open book and must be graded by the approved provider. The provider must issue certificates of completion only to those students who have passed the final examination.

Authority: C.I.C. § 1812

Reference: C.I.C. §1810.7

2105.10 Certificates of Completion

- (a) A provider must give a certificate of completion to each student who successfully completes a prelicensing or continuing education course. A duplicate certificate of completion must be issued by a provider upon request in the case of a lost or destroyed certificate. A certificate of completion must contain the following information:
 - (1) An original signature of the student and the instructor or provider director;
 - (2) the course title and approval number;
 - (3) the provider's name, address, telephone number and provider approval number;
 - (4) for classroom courses the date(s) of the class, the date completed, and the class location (including street address, city, zip code);
 - (5) the number of hours approved for the course;
 - (6) a statement that submitting a false or fraudulent certificate of completion to the Department may result in denial of a license application and revocation of a license;
 - (7) a statement that the student should retain the certificate for five years.
- (b) A provider must submit to the Department a Provider Roster, which appears as section

2105.19, of students given certificates of completion. A roster is to be submitted, using electronic filing, within ten (10) business days following completion of a prelicensing course. A roster is to be submitted, using electronic filing, within thirty (30) calendar days following the completion of a continuing education course. Under special circumstances approved in advance by the Department, a provider may submit a typed or printed roster form. The roster must contain the following:

- (1) the student's name, social security number and insurance license number (if any);
- (2) the provider's name and approval number;
- (3) the course title and approval number;
- (4) the date(s) of the course, the date completed, and the location (including street address, city, and zip code) of the class;
- (5) the number of hours approved for the course;
- (6) the signature of the provider director certifying the accuracy of the information provided;
- (7) the name of the instructor.

Authority: C.I.C. § 1812

Reference: C.I.C. §1810.7

2105.11 Enforcement

- (a) The Department may revoke or suspend approval of a provider, issue approval on a restricted basis, and/or impose a monetary penalty, if:
 - (1) A basis exists that would have authorized the Department to deny approval to the provider;
 - (2) the provider violated these regulations or applicable provisions of the Insurance Code;
 - (3) The provider failed to exercise reasonable care in evaluating the competency, good character, and integrity of an instructor; or
 - (4) The provider allowed another person to use the provider's approved provider status or course approval status.
- (b) A provider whose approval is revoked or suspended, or upon whom a monetary penalty is imposed, must reimburse the Department for its costs of investigating and prosecuting the provider for the violation.

- (c) Insurance Code section 1742 shall apply to providers. For such purposes, “approval” shall be interpreted the same as “license.” When warranted, the Department may issue a restricted approval, or may revoke an unrestricted approval and issue a restricted approval in lieu thereof.
- (d) A provider shall be considered a “subject person,” and be chargeable as such pursuant to Insurance Code section 1748.5.
- (e) An unapproved provider or person representing that provider who states or implies that the provider is approved shall be chargeable pursuant to Insurance Code section 12921.8 as if the provider were an unlicensed insurance agent.
- (f) Insurance Code sections 1669 and 1738 shall apply to approval as a provider and to an application for approval as a provider.
- (g) A provider must pay the below monetary penalties, plus any investigation and prosecution costs, for the following violations. The existence of this monetary penalty schedule does not preclude the Department from revoking or suspending the approval of a provider, in addition to or in lieu of imposing a monetary penalty, if the facts warrant. The Department may impose a monetary penalty without commencing a formal enforcement action pursuant to California Government Code sections 11500 *et seq.* However, if a provider upon whom such a penalty has been imposed requests a hearing within 10 business days of receiving written notice of the penalty, the Department must serve an Accusation pursuant to those sections or rescind the penalty. The fact that a violation is not recited in the below schedule does not mean that a monetary penalty, suspension or revocation may not be imposed by the Department.

<u>Violation of Section</u>	<u>Penalty</u>
<u>Section 2105.3(a) – Provider approval</u>	<u>Automatic denial of any pending application for provider approval, and automatic denial of any application for provider approval filed within twenty four (24) months following the date on which course material was given to a student. Revocation of any approval already issued.</u>
<u>Section 2105.3(b) – Renewal of provider approval</u>	<u>A fine of one and one-half (1½) times the amount of the course fees charged to all students completing courses provided after approval as a provider has expired and not yet been renewed, or \$1,000 per course, whichever is more.</u>
<u>Section 2105.3(c) – Changes in provider information</u>	<u>\$500 fine per failure to notify the Department of a change in provider information.</u>
<u>Section 2105.3(d) – Fictitious name</u>	<u>\$10,000 total maximum fine for all uses of a particular unapproved fictitious name.</u>

<u>Section 2105.4(a) – Qualified instructor</u>	<u>\$5,000 fine for each class taught by an instructor when either requirement of section 2105.4(a) has not been met.</u>
<u>Section 2105.4(b) – Use of disqualified instructor</u>	<u>Automatic revocation of provider’s approval for permitting a person to act as an instructor after express disapproval by the Department.</u>
<u>Section 2105.5 – Course approval</u>	<u>A fine of one and one-half (1½) times the amount of the course fees charged to all students for all courses for which the course had not been approved, or \$1,000 per course, whichever is more.</u>
<u>Section 2105.5(c) – Notification to Department of classes</u>	<u>\$500 fine for each violation.</u>
<u>Section 2105.5(d), (e) and (m) – Advertisement of courses</u>	<u>\$500 fine for each violation of (d) or (e); \$10,000 fine for each violation of (m).</u>
<u>Section 2105.5(g) – Approval of course with major change</u>	<u>A fine equal to 50 percent of the amount of the course fees charged to all students completing courses after a major change without Department approval, or \$1,000 per course, whichever is more.</u>
<u>Section 2105.5(h) – Notification of class change</u>	<u>\$500 fine for any violation.</u>
<u>Section 2105.5(i) and (j) – Credit</u>	<u>A fine equal to 50 percent of the amount of the course fees charged to all students completing courses in which credit is awarded in violation of subdivisions (i) or (j), or \$1,000 per course, whichever is more.</u>
<u>Section 2105(n) – Class cancellation</u>	<u>\$1,000 fine for each violation</u>
<u>Section 2105.6(c) – Expired courses</u>	<u>A fine equal to 50 percent of the amount of course fees charged to all students for all courses for which the course expired and not yet been renewed, or \$1,000 per course, whichever is more.</u>
<u>Section 2105.7 - Maintenance of required records...</u>	<u>\$100 fine per record for each failure to maintain a required record or provide it upon request to the Department.</u>
<u>Section 2105.8 - Credit</u>	<u>A fine equal to 50 percent of the amount of the</u>

	<u>course fees charged to all students completing courses in which credit is awarded in violation of subdivisions (a) or (b).</u>
<u>Section 2105.9(a) and (c)</u> <u>Successful completion of a continuing education course</u>	<u>A fine equal to 50 percent of the amount of the course fees charged to all students completing courses in which credit is awarded in violation of subdivisions (a) or (c).</u>
<u>Section 2105.10(a) – Certificates of completion.</u>	<u>\$200 fine per certificate for each certificate that a provider fails to provide to a student who has successfully completed a course.</u>
<u>Section 2105.10(b) – Attendance rosters.</u>	<u>\$500 fine per roster for each roster that a provider fails to submit on time to the Department using electronic filing.</u>
<u>Insurance Codes Section 1810.7(c) – Course fees.</u>	<u>\$1,000 fine for each student charged a larger fee for a course than the lowest fee charged to any other student taking the same course at the same time.</u>

Authority: C.I.C. § 1812, 1813, and 1814

Reference: C.I.C. §1810.7

2105.12 Department Prelicensing/Continuing Education Program Provider Certification/Renewal Application

State of California

**Prelicensing/Continuing Education Program
Provider Certification/Renewal Application**

446-2 (Rev. 6/2006)

Department of Insurance

Producer Licensing Bureau – Education Section
320 CAPITOL MALL
SACRAMENTO, CA 95814-4309
www.insurance.ca.gov
Information (916) 492 - 3064

1.	Check one only:	<input type="checkbox"/> Original filing	<input type="checkbox"/> Renewal	Provider Number: _____	DEPARTMENT USE ONLY: Provider Number _____ Effective date: _____
		<input type="checkbox"/> Change of Provider Director			
2.	Check one only:	<input type="checkbox"/> Continuing Education	<input type="checkbox"/> Prelicensing Education		

3.	Entity Type:	<input type="checkbox"/> Sole Proprietor SSN _____ <input type="checkbox"/> Partnership FEIN: _____	<input type="checkbox"/> Corporation FEIN: _____ <input type="checkbox"/> Association FEIN: _____	BY: _____ Date: _____
4.	Entity name:			
5.	Does the organization intend to use a fictitious (DBA) name? Yes No If YES, list such name: (Name must be approved by the Department prior to use)			
6.	Business Address*:	Number/Street (PO Box is not acceptable)		
		City/State/Zip		
* If located outside of California, attach completed Form 446-40, Out-of-State Provider Jurisdiction Agreement.				
7.	Mailing Address:	Number/Street/PO Box		
		City/State/Zip		
8.	Phone Numbers:	Toll free ()	Business ()	Fax ()
9.	Record Storage Address**:	Number/Street (PO Box is not acceptable)		
		City/State/Zip		
** If address is outside of California, attach completed Form 446-32, Stipulation To Maintain Records Outside of California.				
10.	Record Storage Contact Person:	Last	First	Middle
		Business Phone ()	Fax number ()	

16.	Is this organization now using or has it ever used any name other than listed in #4 or #5 above? _____ Yes _____ No If YES, list such names and dates used:
17.	Has the organization submitted to the Department within the last year, a filing for which an approval has not been issued? _____ Yes _____ No If YES, list name under which the filing was made and date filed:

COMPLETE THE AREA BELOW FOR YOUR ORGANIZATION TYPE. (Attach additional sheets if more space is needed.)

18. **CORPORATE and ASSOCIATION APPLICANTS:** Complete the following and attach a copy of the articles of incorporation or articles of association. If applicant is an admitted insurer and there has been no change in officers, directors or stockholders (any shareholder owning 10% or more interest in the organization) since the last official filing with the Department, you may attach a letter so stating in lieu of listing the officers, directors and stockholders below. If there has been a change, the following must be completed.

	Name: Last, First Middle	Residence Address	Social Security No. *
President			
Vice President			
Secretary			
Treasurer			
Director			
Director			
Director			
Stockholder			
Stockholder			

19. **PARTNERSHIP APPLICANT:** List name and address of all partners and attach copy of the partnership agreement. If no agreement, submit letter signed by all partners.

Partner Name: Last, First Middle	Residence Address	Social Security No. *

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20. SOLE PROPRIETOR APPLICANT: List name and address of proprietor.

Name: Last, First Middle	Residence Address	Social Security No. *

*PERSONAL INFORMATION NOTICE: Pursuant to the Federal Privacy Act (P.L. 93-579) and the Information Practices Act of 1997 (Civil Code Section 1798, et seq.), notice is hereby given for the request of personal information by this form. The requested personal information is voluntary. The principle purpose of the voluntary information is to facilitate the processing of this form. The failure to provide all or any part of the requested information may delay processing of this form. No disclosure of personal information will be made unless permissible under Article 6, Section 1798.2 of the IPA of 1997. Each individual has the right upon request and proper identification, to inspect all personal information in any record maintained on the individual by an identifying particular.

21.	<p>Is there any person within the organization, other than listed in question (18), (19), or (20), who acts in the capacity of a Controlling Person as defined in Section 1668.5 of the California Insurance Code, who possesses decision making authority in matters pertaining to prelicensing and/or continuing education? ___ YES ___ NO</p> <p>If YES, list name, residence address, and social security number of such person(s): attach a separate sheet if more space is needed.</p> <hr/>
22.	<p>Has the organization or have any of its partners, members, controlling persons, officers, directors, or any shareholders owning a 10% or more interest in the organization, been the subject of any administrative agency disciplinary action? For the purpose of this question, administrative agency disciplinary action includes but is not limited to: having any professional, vocational or business license denied, suspended, placed on probation, restricted or revoked, or any fine imposed; withdrawing any application or surrendering any license to avoid disciplinary action; being issued a cease and desist order or its equivalent; being the subject of a conservation, liquidation, rehabilitation or receivership order. _____ YES _____ NO</p>
23.	<p>Has the organization or have any of its partners, members, controlling persons, officers, any shareholders owning a 10% or more interest in the organization, ever been convicted of a crime? _____ YES _____ NO</p> <p>"Crime" includes a felony or misdemeanor and military offenses. "Convicted" includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere, having had any charge dismissed, expunged or plea withdrawn pursuant to Penal Code Section 1203.4, or having been given probation, a suspended sentence or a fine. You may exclude traffic citations and juvenile offenses.</p>

IMPORTANT NOTE: If the answer is "YES" to question (22) or (23) above, attach a detailed statement, signed by an authorized person for the organization, listing the events which led to the charges (dates and places). If the matter was heard in court, attach copies CERTIFIED BY THE COURT of the Criminal Complaint and the Sentencing Minute Order showing the final plea, judgment and sentence. If any disciplinary action was taken by an administrative agency, attach a certified copy of the action.

24.	Is the organization registered with the Bureau for Private Postsecondary and Vocational Education? _____ Yes _____ No If YES, list approval number: _____
25.	Describe the organization's experience in offering educational programs to insurance licensees: Attach separate sheet if more space is needed.
26.	Provide a complete statement of your refund policy and describe how this policy will be transmitted to students before registration (submit sample):
27.	Indicate instruction method of courses to be offered: <input type="checkbox"/> Contact (attendance required) <input type="checkbox"/> Non-Contact (self-directed) <input type="checkbox"/> Both Contact and Non-Contact
28.	For Contact courses, the following information is required: 1) Sample of attendance record forms proposed for use meeting the requirements sections 2105.7 (c) and 2188.5 (b) of California Code of Regulations. 2) Sample of Certificate of Completion (see section 2105.10 and 2188.8 (a) and (d) of the California Code of Regulations).
29.	For Non-Contact courses, a statement providing the following information is required: 1) How long do students have to complete the course and how is that information transmitted to them? 2) What is your method for determining what date to use for course completion date and how is that information communicated to students? 3) Please supply information about protecting the integrity of the exam: who has control of the answer key(s); what is a passing grade; if someone fails the exam may they retake the exam and, if so, how many times and would it be the same exam; and do you return exams to students or discuss the answers with them? 4) Please enclose copy of your instruction sheet that goes to the student upon registration. 5) Sample of Certificate of Completion (see sections 2105.10 and 2188.8 (a) and (d) of the California Code of Regulations).

CERTIFICATION

I agree to (a) maintain records of enrollments, attendance, exam grades and other pertinent information as requested by the commissioner for a period of five years (b) provide certificates of completion to those students who successfully complete courses (c) use only qualified instructors to conduct courses (d) timely provide the commissioner with completed course approval applications for programs submitted for credit approval, and (e) comply with the preclicensing and continuing education regulations and all applicable California Insurance Code sections. Further, I certify under penalty of perjury that I am the person who has responsibility for the administration of the operations contained in this application; that the information contained in this application is true and correct; and that no approved course will be offered for credit unless the organization holds an active provider approval status. Lastly, I understand that I must promptly report to the commissioner any changes in the information contained in this form.

Original Signature of Provider Director

Date

Print name

FILING INSTRUCTIONS:

This form must be completed by each entity desiring to be certified or to renew certification as a prelicensing or continuing education provider.

Type or print clearly in ink. All sections of this form must be completed and submitted with proper attachments and filing fees to the Department.

Attach additional sheets if more space is needed to answer questions.

Please send this completed application, other required attachments and a NON-REFUNDABLE \$64.00 filing fee as stated Section 1751.1 of the California Insurance Code on the Schedule of Fees to:

Make checks	California Department of Insurance
payable to:	Producer Licensing Bureau - Education Section
	P.O. Box 957
	Sacramento, CA 95812-0957

Education Section Inquiries: (916) 492-3064

Authority: C.I.C. § 1812

Reference: C.I.C. §1810.7

2105.13 Out-of-State Provider Jurisdiction Agreement

State of California

**Prelicensing/Continuing Education Program
Out-of-State Provider Jurisdiction Agreement**

446-40 (Rev. 02/2001)

Department of Insurance

Producer Licensing Bureau – Education Section
320 CAPITOL MALL
SACRAMENTO, CA 95814-4309
Information (916) 492-3064
www.insurance.ca.gov

INSTRUCTIONS:

* This form must be completed by every provider and provider applicant whose head office is located outside of California.

DEPARTMENT USE ONLY:

Provider Number _____

Date Received _____

Provider Number (if none, mark "pending"): _____ Date: _____

Provider Name: _____ Telephone: _____

Address:

Street_____
City_____
State_____
Zip

On behalf of the above named provider, I stipulate and agree:

(a) That in any action or special proceeding brought against the provider in the State of California, any document or process may be served on the commissioner with the same effect as though served upon the provider, and such service will give jurisdiction over the provider to the same extent as if the provider were a resident of the State of California.

(b) That any action or special proceeding brought by the provider against the Insurance Commissioner of the State of California will be brought in the City and County of San Francisco or in the County of Los Angeles.

(c) That the provider will appear at the Office of the Insurance Commissioner in the City of San Francisco or in the City of Los Angeles at any time, pursuant to notice of hearing, order to show cause, or subpoena issued by the commissioner, if such document is deposited in the United States mail, certified and postage prepaid, in a cover addressed to the provider at the last address filed by it with the commissioner, such deposit in mail being 31 or more days before the date specified in such document for such appearance, and that in the event of failure so to appear the provider hereby consents to recession or denial of provider certification by the commissioner.

PROVIDER DIRECTOR NAME _____
(Print or type)PROVIDER DIRECTOR SIGNATURE: _____
DATE: _____Authority: C.I.C. § 1812Reference: C.I.C. §1810.72105.14 Prelicensing/Continuing Education Program Instructor Qualification

State of California

**Prelicensing/Continuing Education Program
Instructor Qualification Form**

446-4 (Rev. 6/2006)

Department of Insurance

INSTRUCTIONS:

- This form must be completed by each proposed instructor, lecturer, moderator or person conducting a classroom course, seminar, workshop, conference, etc.
- Type or print clearly in ink.
- Provider Director must verify the information provided by the instructor.
- **DO NOT SUBMIT THIS FORM TO THE DEPARTMENT. PLEASE RETAIN THIS FORM IN YOUR FILES FOR FIVE YEARS.**
- Attach additional sheets if more space is needed to answer questions.

Provider Number: _____ Date: _____

Provider Name: _____ Telephone: _____

Address: _____
Street City State Zip Code

Instructor Name: _____ Residence Phone: _____

Residence Address: _____
Street City State Zip Code

List the course titles and course numbers to be taught:

Course Title

Course Number

Describe your experience (3 years within the last 5 years) in the course subject matter:

If you hold or have ever held an insurance license, complete the following:

License Type

License Number

State or Province

Dates License Held

From

To

If you have a college degree in the subject matter being taught, complete the following:

Name of College or University

Course of Study

Degree

Date Completed

Please indicate if you hold a recognized professional insurance designation and the date earned:

____ LUTC ____ CLU ____ AAI ____ CPCU ____ CIC ____ Other: _____

If you hold a recognized professional credential in the subject matter being taught, complete the following:

Type of Credential

Credential Number

Date Earned

State or Province Issued

Have you ever been an instructor for another approved prelicensing or continuing education provider?

____ YES ____ NO If YES, list the provider names, dates and reasons for leaving:

Have you been the subject of any administrative agency disciplinary action? For the purpose of this question, administrative agency disciplinary action includes but is not limited to: having any professional, vocational or business license denied, suspended, placed on probation, restricted or revoked, or any fine imposed; withdrawing any application or surrendering any license to avoid disciplinary action; being issued a cease and desist order or its equivalent; being the subject of a conservation, liquidation, rehabilitation or receivership order. _____ YES _____ NO

Have you ever been convicted of a crime? _____ YES _____ NO

"Crime" includes a felony or misdemeanor and military offenses. "Convicted" includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere, having had any charge dismissed, expunged or plea withdrawn pursuant to Penal Code Section 1203.4, or having been given probation, a suspended sentence or a fine. You may exclude traffic citations and juvenile offenses.

< IMPORTANT NOTE: If the answer is "YES" to either of the above two questions, attach a detailed statement, signed by you, listing the events which led to the charges (dates and places). If the matter was heard in court, attach copies CERTIFIED BY THE COURT of the Criminal Complaint and the Sentencing Minute Order showing the final plea, judgment and sentence. If any disciplinary action was taken by an administrative agency, attach a certified copy of the action.

INSTRUCTOR CERTIFICATION

I certify under penalty of perjury that the information contained in this application is true and correct and that nothing has been withheld which would influence a complete evaluation of my qualifications and conduct as an instructor.

I understand that this completed application will be maintained by the provider and made available to the commissioner as requested.

Original Signature of Instructor

Date

PROVIDER VERIFICATION

I certify under penalty of perjury that I have reviewed and verified the qualifications of the instructor named above. To the best of my knowledge and belief, this person meets at least one of the following instructor qualification requirements as stated in sections 2105.4 and 2188.1 of the California Code of Regulations:

- _____ Three years experience within the last five years in the course subject matter, which experience may include holding an appropriate insurance license for the subject being taught.
- _____ Possession of a college degree in the subject matter being taught.
- _____ Possession of a related recognized professional designation in the subject matter being taught.
- _____ Possession of a related recognized professional credential in the subject matter being taught.

DO NOT SUBMIT THIS FORM TO THE DEPARTMENT. PLEASE RETAIN THIS FORM IN YOUR FILES FOR REVIEW DURING A PROVIDER AUDIT.

Original Signature of Provider Director

Date

Printed Name of Provider Director

Authority: C.I.C. § 1812

Reference: C.I.C. §1810.7

2105.15 Bail Course Approval/Renewal Application

State of California

Department of Insurance

Bail Course Approval/Renewal Application

LIC001B (Rev. 6/2006)

Producer Licensing Bureau – Education Section

320 CAPITOL MALL

SACRAMENTO, CA 95814-4309

Information (916) 492-3064

www.insurance.ca.gov

Instructions:

- This form must be completed for each course to be approved.
- A completed application with the proper attachments and filing fee must be received in the Department at least 30 days prior to the first course presentation.
- Courses must be a minimum of one hour; no fractional hours are granted.

Department Use Only:

Course #: _____

Approval period: _____

Credit Hours: _____ Category code: _____

First Course presentation dates: _____

Provider Number: _____

Phone Number: () _____

Provider
Name:

Address:

Street

City

State

Zip

Course Title:*

[Provide Course # if
renewing course.]

Check one course type:

☐ 12-hour Prelicensing

☐

Continuing
Education:

Number of Hours Requested: _____

Instruction Method:

☐ Contact

☐ Correspondence

☐ Internet

Number of times course to be given during approval
period: _____

(for Internet courses, please mark approval period as N/A)

Include on Department's list of courses open to
public?

☐ Yes ☐ No

Is the written proof of consultation attached pursuant to Section 1810.7 (c) of the California Insurance Code?

☐ Yes ☐ No

If no, when will it be received by the Department?

For Department use only:

_____ Course approved _____ Course **not** approved.

By: _____

Education Section Staff Signature

Date

*Advertising and course materials must use this exact title. Courses based on another provider's material must be approved by that provider and must use same name.

REQUIRED ATTACHMENTS:

A. For Contact Courses:

1. _____ A detailed statement on how the course is relevant to bail topics and products.
2. _____ A detailed outline of approximately one page per hour of instruction including the time each topic is being presented.
3. _____ A copy of all materials presented to each student if a detailed outline is not submitted with application.
4. _____ An agenda showing the beginning and ending times, breaks, and time allotted for exams, if applicable.
5. _____ A completed Class Presentation Schedule form for each presentation.
6. _____ A current authorization letter from the author or publisher if using another vendor's source material as the basis for the course.
7. _____ California prelicensing curriculum and educational objectives with every line page-referenced to the source book(s) used. **(For Prelicensing Courses Only)**

B. For Correspondence or Internet Courses:

1. _____ A detailed statement on how the course is relevant to bail topics and products.
2. _____ Audio cassette, video tape, computer diskette, text book for the course or copy of the text cover, copyright page and table of contents if using another vendor's pre-approved material/book
3. _____ Internet courses must include your Internet address, security measures, log-on and password for our review of course(s). Answers to exam questions must reference section and screen for answer source.
4. _____ An examination with the questions not in chapter order.
5. _____ Answers to all exam questions with page and paragraph referencing to the source book(s) used.
6. _____ A current authorization letter from the author or publisher if using another vendor's source material.
7. _____ Copy of instruction sheet sent to students.
8. _____ For an Internet course, a description of the measures the provider will employ to assure that students are actively engaged in course material during the entire time the student is online.

CERTIFICATION:

I certify under penalty of perjury that I have read and understand the information and requirements contained in this application, that all statements are true and nothing has been withheld which would influence a complete evaluation of this course.

Original Signature of Provider Director

Date

Printed Name of Provider Director

FILING INSTRUCTIONS:

This form must be completed by each entity desiring a bail course to be approved or renewed for prelicensing or continuing education.

Please send the completed application, other required attachments and the following NON-REFUNDABLE filing fee as stated Section 1751.1 of the California Insurance Code on the Schedule of Fees to:

California Department of Insurance
Producer License Bureau – Education Section
P.O. Box 957
Sacramento, CA 95812-0957

Filing Fees:
\$32 per Continuing Education Course
\$64 per Prelicensing Education Course

Make checks payable to:
California Department of Insurance

Attach additional sheets if more space is needed to answer questions.

Course applications must be received in this office at least 30 days prior to the first course presentation date. Course advertisements for pending courses must clearly state that the course has been submitted and is pending approval, if the course application is complete and submitted within the appropriate time frame.

Education Section Inquiries: (916) 492-3064

Authority: C.I.C. § 1812

Reference: C.I.C. §1810.7

2105.16 Class Presentation Schedule

State of California

Department of Insurance

Class Presentation Schedule

446-12 (Rev.11/2000)

Producer Licensing Bureau – Education Section
320 CAPITOL MALL
SACRAMENTO, CA 95814-4309
Information (916) 492-3064
www.insurance.ca.gov

Instructions:

- Type or print clearly. **USE A SEPARATE SHEET FOR EACH CLASS PRESENTATION.**
- To inform the Department of a new class, mark NEW box and provide all pertinent information below.
- To notify the Department of a change to a class schedule previously submitted, mark CHANGE, give the original date, time, location and provide new information below.
- To cancel a class previously submitted, mark CANCEL and complete information below.
- This completed form must be received by the Department at least 14 days prior to the original class presentation. Subsequent presentations must be received at least 10 days prior to class presentation. No faxes will be accepted.
- Late schedules may not be accepted and attendees may not receive continuing education credit.
- The information provided below must match the information on the certificate of completion and the provider roster.

CHECK ONE: New ☐ Cancel ☐ Change ☐ ☐ ☐

Original Date/Time:

Original Location:

Provider ID #:

Provider Name

Course ID#:

Credit Hours:

Instructor Name:

Course Name:

Start Date*:

Start Time:

End Date:

End Time:

Military Time

Military Time

*If course spans more than one day, each day must be listed in Daily Presentation Schedule chart below.

Location of Presentation:

Street:

Room/Suite:

City:

State:

Zip:

Daily Presentation Schedule: Times must be shown in military time (i.e. 8:00 AM = 0800; 2:00 PM = 1400)

Day	Date: (month/day/year)	Begin Time	End Time
Day 1			
Day 2			
Day 3			
Day 4			
Day 5			
Day 6			
Day 7			

(Attach sheet for additional days)

I certify that the class information provided here is true and correct to the best of my knowledge. Any changes will be provided to the Department promptly.

Original Signature of Provider Director

Date

()

Printed Name of Provider Director

Phone Number

Authority: C.I.C. § 1812

Reference: C.I.C. §1810.7

2105.17 Prelicensing and Continuing Education Program Course Attendance Record and
Verification Form

State of California

Department of Insurance

PRELICENSING / CONTINUING EDUCATION PROGRAM
COURSE ATTENDANCE RECORD AND VERIFICATION FORM

446-5 (Rev. 6/2006)

Producer Licensing Bureau – Education Section
320 CAPITOL MALL
SACRAMENTO, CA 95814-4309
Information (916) 492-3064
www.insurance.ca.gov

Course Number: _____

Course Title: _____

Provider Number: _____

Provider Name: _____

Class Location: _____

Street

City

State

Zip Code

Class Date(s): _____

VERIFICATION:

I have reviewed and verified that the persons named on the attached Course Attendance Record Sheet(s), consisting of _____ pages, were present at this class during the times and days indicated.

Original Signature of Instructor

Date

Printed Name of Instructor

CERTIFICATION:

I have reviewed this Course Attendance Record Verification and the attached Course Attendance Record Sheet(s), and certify that I find them accurate and in order, to the best of my knowledge.

Original Signature of Provider Director

Date

Printed Name of Provider Director

COURSE ATTENDANCE RECORD SHEET

Provider #:		Provider Name:				Page of	
Course #:		Course Name:					
Date:		Begin Time:		End Time:		Session of	
Location:						Instructor:	
	Street	City	State	Zip			

NOTE: Those students who do not sign in and out will not be granted continuing education credit.

TIME-IN : AM/PM	PRINTED NAME (LAST, FIRST M.I.)	SOCIAL SECURITY NUMBER*	INDIVIDUAL INSURANCE LICENSE #	TIME-OUT : AM/PM	SIGNATURE I CERTIFY UNDER PENALTY OF PERJURY THAT THESE ARE MY CORRECT ATTENDANCE TIMES.

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

The Department requests disclosure of a student's social security number pursuant to Insurance Code Sections 1749, 1749.2, 1749.3, 1749.31, 1749.4, 1749.5, 1749.7, 1810.7 and CCR, Title 10, Chapter 5, Sections 2105.7 (c) (1), 2105.10 (b) (1), and 2188.5 (b) (1). This information is requested so that the Department can properly identify and assign credit to students who have completed preclicensing or continuing education

courses. While a student's disclosure of his or her social security number here is not mandatory, any failure to provide this information may delay or otherwise impede the Department in assigning credit for the completion of such courses to the appropriate students.

Authority: C.I.C. § 1812
Reference: C.I.C. §1810.7

2105.18 Prelicensing and Continuing Education Provider Stipulation to Maintain Records
Outside of California

State of California
Prelicensing and Continuing Education Provider
Stipulation to Maintain Records Outside of California
446-32 (Rev. 06/2006)

Department of Insurance

Producer Licensing Bureau – Education Section
320 CAPITOL MALL
SACRAMENTO, CA 95814-4309
Information (916) 492-3064
www.insurance.ca.gov

APPLICATION

The undersigned, as provider director of a prelicensing or continuing education provider duly authorized by the California Department of Insurance, has requested the Commissioner's authorization to maintain provider records at a location outside of California.

STIPULATION

In consideration of the Commissioner's granting of authorization to maintain the records described in California Code of Regulations, sections 2105.7 and 2188.4, at a location outside of California, the undersigned provider director, on behalf of the duly authorized education provider, agrees to reimburse the California Department of Insurance for the expense of travel for the Commissioner's agent to conduct routine records examinations. Any refusal by a provider to reimburse the California Department of Insurance shall constitute grounds for automatic termination of the Commissioner's authorization to maintain records outside of the state, and may also be considered in any subsequent hearing on the rescission of provider status. This agreement will remain in force concurrent with the provider's certification period.

PROVIDER NUMBER: _____

PROVIDER NAME: _____
(Print or type)

PROVIDER DIRECTOR NAME: _____
(Print or type)

PROVIDER DIRECTOR SIGNATURE: _____ DATE: _____

Authority: C.I.C. § 1812
Reference: C.I.C. §1810.7

2105.19 Provider Roster

State of California
Provider Roster
446-13 (Rev. 06/2006)

Department of Insurance

Producer Licensing Bureau – Education Section
320 CAPITOL MALL
SACRAMENTO, CA 95814-4309
Information (916) 492-3064
www.insurance.ca.gov

Important: This form must be submitted to the California Department of Insurance (CDI) within **10 days** following the completion of the prelicensing course and **30 days** following the completion of the continuing education or training course. **Late rosters may not be accepted.** *Items marked with an asterisk (*) are not required for non-contact courses.*

Pre-licensing Course: Continuing Education Course:

Contact course: Non-Contact course: *

Provider ID #: _____ Provider Name: _____

Course ID #: _____ Credit Hours: _____ Course Name: _____

*Course Start Date: _____ *Beginning Time: _____ *End Time: _____ Completion Date: _____
Military time (i.e. 1300 = 1:00 P.M.)

*Class location: _____
Street Address

Suite/Room

City

State

Zip Code

The Department requests disclosure of a student's social security number pursuant to Insurance Code Sections 1749, 1749.2, 1749.3, 1749.31, 1749.4, 1749.5, 1749.7, and 1810.7 and California Code of Regulations, Title 10, Chapter 5, Section 2105.10 (b) (1) through (7) and 2188.6 (b)(1). This information is requested so that the Department can properly identify and assign credit to students who have completed prelicensing or continuing education courses. While a student's disclosure of his or her social security number here is not mandatory, any failure to provide this information may delay or otherwise impede the Department in assigning credit for the completion of such courses to the appropriate students.

ALL ENTRIES MUST BE TYPED.

#	Social Security Number	Licensee Name: Last, First M.I.	Individual License #
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			

Please use backside for additional names.

Certification

Original signature of Provider Director _____ Date _____ Phone _____

Printed Name of Provider Director _____

Page 2

#	Social Security Number	Licensee Name: Last, First M.I.	Individual License #
16.			
17.			
18.			
19.			
20.			
21.			
22.			
23.			
24.			
25.			
26.			
27.			
28.			
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41.			
42.			
43.			
44.			

45.			
46.			
47.			
48.			
49.			
50.			

Authority: C.I.C. § 1812

Reference: C.I.C. §1810.7